

PART B - FEE(S) TRANSMITTAL

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490 7590 12/18/2007

VIDAS, ARRETT & STEINKRAUS, P.A.
 SUITE 400, 6640 SHADY OAK ROAD
 EDEN PRAIRIE, MN 55344



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Wendy Steinborn	(Depositor's name)
<i>Wendy Steinborn</i>	(Signature)
March 17, 2008	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/664.132	09/17/2003	Trace Eidenschink	863.2-10990	3759

TITLE OF INVENTION: CATHETER WITH SHEATHED HYPOTUBE

03/18/2008 HSEBREN2 00000036 220350 10664132

E1 FC:1501 1440.00 DA
 E2 FC:1504 380.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/18/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
KOHARSKI, CHRISTOPHER	3763	604-523000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Vidas, Arrett &
 2 Steinkraus
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Boston Scientific Scimed, Inc.

Maple Grove, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 220350 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Jennifer L. Buss

Date March 17, 2008

Typed or printed name Jennifer L. Buss

Registration No. 57321

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	Tracee Eidenschink
Application No.:	10/664132
Filed:	September 17, 2003
For:	Catheter With Sheathed Hypotube
Group Art Unit:	3763
Examiner:	Christopher Koharski

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Docket No.: S63.2B-10990-US01

FACSIMILE TRANSMITTAL LETTER

TO: Examiner Christopher Koharski

DATE: March 18, 2008

FACSIMILE NO.: 571-273-2885

GROUP ART UNIT: 3763

TIME: 4:40

TOTAL NUMBER OF PAGES (including cover letter): 14

In addition to this 1 page Facsimile Transmittal Letter, following please find 1 page
Part B - Fee Transmittal in duplicate and a 1 page Fee Address Indication Form

Please charge the Issue Fee of \$1440 and the Publication Fee of \$300.00 to Deposit
Account 22-0350. To the extent that any petition is required to consider this communication, please
treat this as such a petition.

Respectfully Submitted,

VIDAS, ARRETT & STEINKRAUS, P.A.

Date: March 17, 2008

By:

Jennifer L. Buss

Reg. No. 57321

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I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark
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Signature:

Wendy Stein